

REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1 / 118

| | | | |
|---|--|---|--|
| 1. NAME OF COMMITTEE (in full) JIM GILMORE FOR PRESIDENT | | 2. IDENTIFICATION NUMBER C00431288 | |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported P.O. Box 19128 | | | |
| CITY, STATE, and ZIP CODE ALEXANDRIA VA 22320 | | 3. IS THIS REPORT FOR : <input type="checkbox"/> Primary <input type="checkbox"/> General | |

4. TYPE OF REPORT (Check here ☐ if this is a Termination Report.)

☐ April 15 Quarterly Report
☒ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report

Monthly Report Due On:

| | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

☐ Twelfth day report preceding _____ (Type of Election)
 election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____
 on _____

IS THIS REPORT AN AMENDMENT ☒ YES ☐ NO

| 5. COVERING PERIOD | FROM | THROUGH |
|--------------------|------------|------------|
| | 04/01/2007 | 06/30/2007 |

| | | |
|--|---|-----------|
| SUMMARY | 6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD | 84133.92 |
| | 7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2) | 187796.16 |
| | 8. SUBTOTAL (Lines 6 and 7) | 271930.08 |
| | 9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) | 216138.63 |
| | 10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8) | 55791.45 |
| | 11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) | 0.00 |
| | 12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) | 128927.37 |
| | 13. EXPENDITURES SUBJECT TO LIMITATION | 325528.49 |
| NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES | 14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) | 350912.95 |
| | 15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2) | 325528.49 |

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

| | |
|---|--------------------|
| Type or Print Name of Treasurer Danny Adams | Date 11/25/2007 |
| Signature of Treasurer | |

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

| | | |
|---|---|--|
| For further information contact: | Federal Election Commission 999 E Street, N.W. Washington, DC 20463 | Toll Free 800-424-9530 Local 202-694-1100 |
|---|---|--|

FEC FORM 3P
(01/2001)

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

JIM GILMORE FOR PRESIDENT

Report Covering the Period

From: 04/01/2007

To: 06/30/2007

| I. RECEIPTS | | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------|---------------------------------------|--|
| 16. FEDERAL FUNDS (Itemize on Schedule A-P) | ..... | 0.00 | 0.00 |
| 17. CONTRIBUTIONS (other than loans) FROM : | | | |
| (a) Individuals/Persons Other Than Political Committees | ..... | 176096.16 | 342662.95 |
| (b) Political Party Committees | ..... | 0.00 | 250.00 |
| (c) Other Political Committees | ..... | 6000.00 | 8000.00 |
| (d) The Candidate | ..... | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d)) | | 182096.16 | 350912.95 |
| 18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | ..... | 0.00 | 0.00 |
| 19. LOANS RECEIVED: | | | |
| (a) Loans Received From or Guaranteed by Candidate | ..... | 2000.00 | 2000.00 |
| (b) Other Loans | ..... | 3700.00 | 32804.03 |
| (c) TOTAL LOANS (Add 19(a) and 19(b)) | ..... | 5700.00 | 34804.03 |
| 20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) : | | | |
| (a) Operating | ..... | 0.00 | 0.00 |
| (b) Fundraising | ..... | 0.00 | 0.00 |
| (c) Legal and Accounting | ..... | 0.00 | 0.00 |
| (d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c)) | | 0.00 | 0.00 |
| 21. OTHER RECEIPTS (Dividend, Interest, etc.) | ..... | 0.00 | 2.96 |
| 22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21) | ..... | 187796.16 | 385719.94 |
| II. DISBURSEMENTS | | | |
| 23. OPERATING EXPENDITURES | ..... | 211738.63 | 325528.49 |
| 24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | ..... | 0.00 | 0.00 |
| 25. FUNDRAISING DISBURSEMENTS | ..... | 0.00 | 0.00 |
| 26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS | ..... | 0.00 | 0.00 |
| 27. LOAN REPAYMENTS MADE : | | | |
| (a) Repayment of Loans made or Guaranteed by Candidate | ..... | 2000.00 | 2000.00 |
| (b) Other Repayments | ..... | 2400.00 | 2400.00 |
| (c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)) | ..... | 4400.00 | 4400.00 |
| 28. REFUNDS OF CONTRIBUTIONS TO : | | | |
| (a) Individuals/Persons Other Than Political Committees | ..... | 0.00 | 0.00 |
| (b) Political Party Committees | ..... | 0.00 | 0.00 |
| (c) Other Political Committees | ..... | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c)) | ..... | 0.00 | 0.00 |
| 29. OTHER DISBURSEMENTS | ..... | 0.00 | 0.00 |
| 30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) | ..... | 216138.63 | 329928.49 |
| III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.) | | | |
| 31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) | ..... | 0.00 | |

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE 3 / 118
(Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
(PAGE 3, FEC FORM 3P)

1. NAME OF COMMITTEE (in full)

JIM GILMORE FOR PRESIDENT

ADDRESS (number and street)

P.O. Box 19128

CITY, STATE, and ZIP CODE

ALEXANDRIA

VA

22320

2. IDENTIFICATION NUMBER

C00431288

ALLOCATION BY STATE

| STATE | ALLOCATION THIS PERIOD | TOTAL ALLOCATION TO DATE | STATE | ALLOCATION THIS PERIOD | TOTAL ALLOCATION TO DATE |
|----------------------|---------------------------|--------------------------------|----------------|---------------------------|--------------------------------|
| Alabama | 0.00 | 0.00 | Nebraska | 0.00 | 0.00 |
| Alaska | 0.00 | 0.00 | Nevada | 0.00 | 0.00 |
| Arizona | 0.00 | 0.00 | New Hampshire | 0.00 | 0.00 |
| Arkansas | 0.00 | 0.00 | New Jersey | 0.00 | 0.00 |
| California | 0.00 | 0.00 | New Mexico | 0.00 | 0.00 |
| Colorado | 0.00 | 0.00 | New York | 0.00 | 0.00 |
| Connecticut | 0.00 | 0.00 | North Carolina | 0.00 | 0.00 |
| Delaware | 0.00 | 0.00 | North Dakota | 0.00 | 0.00 |
| District of Columbia | 0.00 | 0.00 | Ohio | 0.00 | 0.00 |
| Florida | 0.00 | 0.00 | Oklahoma | 0.00 | 0.00 |
| Georgia | 0.00 | 0.00 | Oregon | 0.00 | 0.00 |
| Hawaii | 0.00 | 0.00 | Pennsylvania | 0.00 | 0.00 |
| Idaho | 0.00 | 0.00 | Rhode Island | 0.00 | 0.00 |
| Illinois | 0.00 | 0.00 | South Carolina | 0.00 | 0.00 |
| Indiana | 0.00 | 0.00 | South Dakota | 0.00 | 0.00 |
| Iowa | 0.00 | 0.00 | Tennessee | 0.00 | 0.00 |
| Kansas | 0.00 | 0.00 | Texas | 0.00 | 0.00 |
| Kentucky | 0.00 | 0.00 | Utah | 0.00 | 0.00 |
| Louisiana | 0.00 | 0.00 | Vermont | 0.00 | 0.00 |
| Maine | 0.00 | 0.00 | Virginia | 0.00 | 0.00 |
| Maryland | 0.00 | 0.00 | Washington | 0.00 | 0.00 |
| Massachussetts | 0.00 | 0.00 | West Virginia | 0.00 | 0.00 |
| Michigan | 0.00 | 0.00 | Wisconsin | 0.00 | 0.00 |
| Minnesota | 0.00 | 0.00 | Wyoming | 0.00 | 0.00 |
| Mississippi | 0.00 | 0.00 | Puerto Rico | 0.00 | 0.00 |
| Missouri | 0.00 | 0.00 | Guam | 0.00 | 0.00 |
| Montana | 0.00 | 0.00 | Virgin Islands | 0.00 | 0.00 |
| | | | TOTALS | 0.00 | 0.00 |

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 4 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Mohammad Afzal

Mailing Address

314 Senate Court

City

Herndon

State

VA

Zip Code

20170

FEC ID number of contributing
federal political committee.

Name of Employer

Ravi Kabob Restaurant

Occupation

Owner

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 2 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5473

B.

Full Name (Last, First, Middle Initial)

Mr. Nasim Ahmad

Mailing Address

7216 Park Avenue

4

City

Summit

State

IL

Zip Code

60501

FEC ID number of contributing
federal political committee.

Name of Employer

Raani Corporation

Occupation

Manager

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 2 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5550

C.

Full Name (Last, First, Middle Initial)

Mr. Shahid Ahmad

Mailing Address

4713 Grand Masters Way

City

Woodbridge

State

VA

Zip Code

22192

FEC ID number of contributing
federal political committee.

Name of Employer

JP Morgan Chase

Occupation

Manager

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 2 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.5458

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Dr. Mohammad Akbar

Mailing Address

8468 Holly Leaf Drive

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing
federal political committee.Name of Employer
SelfOccupation
Physician

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 2 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5446

B.

Full Name (Last, First, Middle Initial)

Dr. Mohammad Akbar

Mailing Address

8468 Holly Leaf Drive

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing
federal political committee.Name of Employer
SelfOccupation
Physician

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 3 | 0 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

300.00

Contribution

Transaction ID: SA17A.5765

C.

Full Name (Last, First, Middle Initial)

Mr. R. Allen

Mailing Address

2 Ball Mill Place

City

Atlanta

State

GA

Zip Code

30350

FEC ID number of contributing
federal political committee.Name of Employer
Firstmile CommunicationsOccupation
President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 2 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5659

SUBTOTAL of Receipts This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 118

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. R. Allen

Mailing Address

2 Ball Mill Place

City

Atlanta

State

GA

Zip Code

30350

FEC ID number of contributing
federal political committee.

Name of Employer
Firstmile Communications

Occupation
President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 7

Amount of Each Receipt this Period

300.00

Contribution

Transaction ID: SA17A.5684

B.

Full Name (Last, First, Middle Initial)

Mr. Irfan M. Altafullah

Mailing Address

2520 Thoroughbred Lane

City

Orono

State

MN

Zip Code

55356

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation
Cardiologist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5703

C.

Full Name (Last, First, Middle Initial)

Mr. J. Richard Andrews

Mailing Address

4899 White Marsh Road

City

Wakefield

State

VA

Zip Code

23888

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 7

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.4323

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 118

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. M. Omar Ashraf

Mailing Address

12541 Browns Ferry Road

City

Herndon

State

VA

Zip Code

20170

FEC ID number of contributing
federal political committee.

Name of Employer
Sterling Management

Occupation

Executive V.P.

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 7

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5763

B.

Full Name (Last, First, Middle Initial)

Mr. Muhammad Ashraf

Mailing Address

12528 Rock Ridge Road

City

Herndon

State

VA

Zip Code

20170

FEC ID number of contributing
federal political committee.

Name of Employer
Sterling Management

Occupation

V.P.

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 7

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.5766

C.

Full Name (Last, First, Middle Initial)

Ms Amy K. Averill

Mailing Address

878 Peachtree Street NE

801

City

Atlanta

State

GA

Zip Code

30309

FEC ID number of contributing
federal political committee.

Name of Employer
Sutherland, Asbu and Bren-
nan

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 7

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5682

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Jamal M. Barzinji

Mailing Address

500 Grove Street

#200

City

Herndon

State

VA

Zip Code

20170

FEC ID number of contributing
federal political committee.Name of Employer
Self

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 3 | 0 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5757

B.

Full Name (Last, First, Middle Initial)

Mr. Clements Berezowski

Mailing Address

19600 Smith Circle

City

Ashburn

State

VA

Zip Code

20147

FEC ID number of contributing
federal political committee.Name of Employer
Potomac Corp of Virginia,
Inc.

Occupation

Contractor

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 9 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4299

C.

Full Name (Last, First, Middle Initial)

Mr. Kippard W. Berry

Mailing Address

3737 Lake Vista

City

Douglasville

State

GA

Zip Code

30135

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 8 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2000.00

Contribution

Transaction ID: SA17A.4186

SUBTOTAL of Receipts This Page (optional)

6600.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 118

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Robert D. Bickford, Jr.

Mailing Address

161 85th Street

City

Stone Harbor

State

NJ

Zip Code

08247

FEC ID number of contributing
federal political committee.

Name of Employer

Kelley Drye and Warren,
LLP

Occupation

Attorney/Partner

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 8 / 2 0 0 7

Amount of Each Receipt this Period

2100.00

Contribution

Transaction ID: SA17A.5738

B.

Full Name (Last, First, Middle Initial)

Mr. Robert D. Bickford, Jr.

Mailing Address

161 85th Street

City

Stone Harbor

State

NJ

Zip Code

08247

FEC ID number of contributing
federal political committee.

Name of Employer

Kelley Drye and Warren,
LLP

Occupation

Attorney/Partner

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 8 / 2 0 0 7

Amount of Each Receipt this Period

200.00

In-kind - Catering

Transaction ID: SA17A.5744

C.

Full Name (Last, First, Middle Initial)

Mrs. Adele H Binder

Mailing Address

130 Deffern Drive

City

Los Angeles

State

CA

Zip Code

90077

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 3 / 2 0 0 7

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4188

SUBTOTAL of Receipts This Page (optional)

4600.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mrs. Mary Jane Black

Mailing Address

19197 Greggsville Road

City

Purcellville

State

VA

Zip Code

20132

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 3 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.4215

B.

Full Name (Last, First, Middle Initial)

Mr. David P. Bookman

Mailing Address

H.C. 66, Box 25A

City

Romney

State

WV

Zip Code

26757

FEC ID number of contributing
federal political committee.

Name of Employer

Retired

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 9 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.4291

C.

Full Name (Last, First, Middle Initial)

Sen. Rudy Boschwitz

Mailing Address

330 Inland Lane

City

Plymouth

State

MN

Zip Code

55447

FEC ID number of contributing
federal political committee.

Name of Employer

Self

Occupation

Consultant

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 3 | 0 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5295

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mrs. Andrea Boyle

Mailing Address

430 H. Street

City

Lynden

State

WA

Zip Code

98264

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 6 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

200.00

Contribution

Transaction ID: SA17A.5676

B.

Full Name (Last, First, Middle Initial)

Mr. Gerrit Boyle

Mailing Address

430 H. Street

City

Lynden

State

WA

Zip Code

98264

FEC ID number of contributing
federal political committee.Name of Employer
Self-Employed

Occupation

Sales

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 6 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

200.00

Contribution

Transaction ID: SA17A.5677

C.

Full Name (Last, First, Middle Initial)

Alice Bransfield

Mailing Address

12720 Builders Rd.

City

Herndon

State

VA

Zip Code

20170

FEC ID number of contributing
federal political committee.Name of Employer
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 3 | 0 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

0.00

In-kind - Postage Loan Forgiven

Transaction ID: SA17A.5838

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Declan Bransfield

Mailing Address

12720 Builders Rd.

City

Herndon

State

VA

Zip Code

20170

FEC ID number of contributing
federal political committee.Name of Employer
Eberle Assoc.Occupation
President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 3 | 0 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

0.00

In-kind - Postage Loan Forgiven

Transaction ID: SA17A.5840

B.

Full Name (Last, First, Middle Initial)

Mr. Don Buchwald

Mailing Address

2 Meadowbrook Road

City

White Plains

State

NY

Zip Code

10605

FEC ID number of contributing
federal political committee.Name of Employer
Kelley DryeOccupation
Attorney

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 9 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5798

C.

Full Name (Last, First, Middle Initial)

Aubrey Burrow

Mailing Address

6610 Stagecoach Street

City

Springfield

State

VA

Zip Code

22150

FEC ID number of contributing
federal political committee.Name of Employer
Kilroy DecksOccupation
Owner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 4 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5811

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Paul Cali

Mailing Address

3902 Pender Spring Dr.

City

Fairfax

State

VA

Zip Code

22033

FEC ID number of contributing
federal political committee.Name of Employer
American AirlinesOccupation
Pilot

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 3 | 0 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

0.00

In-kind - Postage Loan Forgiven

Transaction ID: SA17A.5842

B.

Full Name (Last, First, Middle Initial)

Mr. John M. Callagy

Mailing Address

3 Althea Lane

City

Darien

State

CT

Zip Code

06820

FEC ID number of contributing
federal political committee.Name of Employer
Kelley DryeOccupation
Lawyer

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 8 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5827

C.

Full Name (Last, First, Middle Initial)

Mr. William Stephen Cannon

Mailing Address

209 Brokkschase Lane

City

Richmond

State

VA

Zip Code

23229

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 1 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.4325

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 118

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Dr. Maqsood A. Chaudry

Mailing Address

855 Dolly Madison Blvd.

City

McLean

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.

Name of Employer
Self

Occupation
Dentist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5707

B.

Full Name (Last, First, Middle Initial)

Dr. Maqsood A. Chaudry

Mailing Address

855 Dolly Madison Blvd.

City

McLean

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.

Name of Employer
Self

Occupation
Dentist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 7

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5761

C.

Full Name (Last, First, Middle Initial)

Mr. Anthony J. Chimblo, III

Mailing Address

24 Sound View Drive

City

Greenwich

State

CT

Zip Code

06830

FEC ID number of contributing
federal political committee.

Name of Employer
Info requested

Occupation
Info requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Amount of Each Receipt this Period

1000.00

contribution

Transaction ID: SA17A.4102

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Mossadaq A. Chughtai

Mailing Address

9109 Lucky Estates Drive

City

Vienna

State

VA

Zip Code

22182

FEC ID number of contributing
federal political committee.Name of Employer
Info Requested

Occupation

Info Requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 2 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5709

B.

Full Name (Last, First, Middle Initial)

Mr. Ralph Cioffi

Mailing Address

200 Oxford Road

City

Tenafly

State

NJ

Zip Code

07670

FEC ID number of contributing
federal political committee.Name of Employer
Bear Stearns

Occupation

Investment Banker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 1 | 1 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5409

C.

Full Name (Last, First, Middle Initial)

Mr. Douglas Combs

Mailing Address

53 Weathersfield Lane

City

Amissville

State

VA

Zip Code

20106

FEC ID number of contributing
federal political committee.Name of Employer
Windmill International

Occupation

Executive

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 6 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5697

SUBTOTAL of Receipts This Page (optional)

5100.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mrs. Gunilla Combs

Mailing Address

53 Weathersfield Lane

City

Amissville

State

VA

Zip Code

20106

FEC ID number of contributing
federal political committee.Name of Employer
HomemakerOccupation
Homemaker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 6 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5699

B.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Coursey

Mailing Address

4702 Jamestown Road

City

Bethesda

State

MD

Zip Code

20816

FEC ID number of contributing
federal political committee.Name of Employer
Kelley Drye and Warren,
LLPOccupation
Attorney/Partner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

300.00

Contribution

Transaction ID: SA17A.5740

C.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Coursey

Mailing Address

4702 Jamestown Road

City

Bethesda

State

MD

Zip Code

20816

FEC ID number of contributing
federal political committee.Name of Employer
Kelley Drye and Warren,
LLPOccupation
Attorney/Partner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

200.00

In-kind - Catering

Transaction ID: SA17A.5748

SUBTOTAL of Receipts This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. James E. Covington, Jr.

Mailing Address

P.O. Box Three Chot Road

City

Richmond

State

VA

Zip Code

23226

FEC ID number of contributing
federal political committee.

Name of Employer

The Covington Company

Occupation

Executive

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 1 | 1 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.5373

B.

Full Name (Last, First, Middle Initial)

Mr. Frank L. Cowles, Jr.

Mailing Address

133 Menlough Drive

City

Warrenton

State

VA

Zip Code

20186

FEC ID number of contributing
federal political committee.

Name of Employer

Cowles Chrysler Plymouth

Occupation

President

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 6 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5672

C.

Full Name (Last, First, Middle Initial)

Mr. Robert No.2 Crotty

Mailing Address

21 Stuyvesant Oval

City

New York

State

NY

Zip Code

10009

FEC ID number of contributing
federal political committee.

Name of Employer

Kelley Drye

Occupation

Lawyer

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 7 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5823

SUBTOTAL of Receipts This Page (optional)

3050.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mrs. Martha Curt

Mailing Address

7372 Goods Mill Road

City

Harrisonburg

State

VA

Zip Code

22801

FEC ID number of contributing
federal political committee.Name of Employer
HomemakerOccupation
Homemaker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 3 | 0 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4227

B.

Full Name (Last, First, Middle Initial)

Mr. Walter Curt

Mailing Address

7372 Gods Mill Road

City

Harrisonburg

State

VA

Zip Code

22801

FEC ID number of contributing
federal political committee.Name of Employer
Power Monitors, IncOccupation
President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 1 | 1 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5411

C.

Full Name (Last, First, Middle Initial)

Mr. Eugene D'Ablemont

Mailing Address

18 Westway

City

Bronxville

State

NY

Zip Code

10708

FEC ID number of contributing
federal political committee.Name of Employer
Kelley DryeOccupation
Lawyer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5829

SUBTOTAL of Receipts This Page (optional)

5100.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Ms Comtesse S. De Paris

Mailing Address

5601 Blvd E. 7G

City

West New York

State

NJ

Zip Code

07093

FEC ID number of contributing
federal political committee.Name of Employer
Suzanne De ParisOccupation
CEO

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5817

B.

Full Name (Last, First, Middle Initial)

Mrs. Reva A. Dewberry

Mailing Address

8401 Arlington Blvd

City

Fairfax

State

VA

Zip Code

22031

FEC ID number of contributing
federal political committee.Name of Employer
HomemakerOccupation
Homemaker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5815

C.

Full Name (Last, First, Middle Initial)

Mr. Sidney O. Dewberry

Mailing Address

8401 Arlington Blvd

City

Fairfax

State

VA

Zip Code

22031

FEC ID number of contributing
federal political committee.Name of Employer
Dewberry, IncOccupation
Owner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5813

SUBTOTAL of Receipts This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. John W. Dietrich

Mailing Address

4 Theal Court

City

Somers

State

NY

Zip Code

10589

FEC ID number of contributing
federal political committee.Name of Employer
Atlas Air, IncOccupation
COO

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 3 | 0 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1200.00

Contribution

Transaction ID: SA17A.4229

B.

Full Name (Last, First, Middle Initial)

Mr. Robert F. Donohue

Mailing Address

5080 Powers Ferry Road NW

City

Atlanta

State

GA

Zip Code

30327

FEC ID number of contributing
federal political committee.Name of Employer
Retired

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 2 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.5689

C.

Full Name (Last, First, Middle Initial)

Bruce Eberle

Mailing Address

1449 Montague Dr.

City

Vienna

State

VA

Zip Code

22181

FEC ID number of contributing
federal political committee.Name of Employer
Eberle CommunicationsOccupation
President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 3 | 0 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

0.00

In-kind - Postage Loan Forgiven

Transaction ID: SA17A.5844

SUBTOTAL of Receipts This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Claire Eberle

Mailing Address

9570 Mcglinn Dr.

City

Laconnor

State

WA

Zip Code

98257

FEC ID number of contributing
federal political committee.Name of Employer
RetiredOccupation
Retired

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 3 | 0 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

0.00

In-kind - Postage Loan Fo-
rgiven

Transaction ID: SA17A.5848

B.

Full Name (Last, First, Middle Initial)

Katherine Eberle

Mailing Address

1449 Montague Dr.

City

Vienna

State

VA

Zip Code

22181

FEC ID number of contributing
federal political committee.Name of Employer
Eberle CommunicationsOccupation
Treasurer

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 3 | 0 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

0.00

In-kind - Postage Loan Fo-
rgiven

Transaction ID: SA17A.5850

C.

Full Name (Last, First, Middle Initial)

Robert Eberle

Mailing Address

9570 Mcglinn Dr.

City

Laconnor

State

WA

Zip Code

98257

FEC ID number of contributing
federal political committee.Name of Employer
Eberle CommunicationsOccupation
Vice President

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 3 | 0 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

0.00

In-kind - Postage Loan Fo-
rgiven

Transaction ID: SA17A.5852

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Andrew Entwistle, Esq.

Mailing Address

200 Business Park Drive

Suite 305

City

Armonk

State

NY

Zip Code

10504

FEC ID number of contributing
federal political committee.

Name of Employer

Entwistle and Cappucci,
LLP

Occupation

Attorney

Receipt For: 2008

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 0 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5634

B.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey H. Erickson

Mailing Address

9997 E. Rising Sun Court

City

Scottsdale

State

AZ

Zip Code

85262

FEC ID number of contributing
federal political committee.

Name of Employer

Atlas Air

Occupation

Board of Directors

Receipt For: 2008

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 4 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4221

C.

Full Name (Last, First, Middle Initial)

Ms Anita Everett

Mailing Address

3563 Cattail Creek Dr

City

Glenwood

State

MD

Zip Code

21738

FEC ID number of contributing
federal political committee.

Name of Employer

Johns Hopkins University
School Of Med

Occupation

Physician

Receipt For: 2008

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 7 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4147

SUBTOTAL of Receipts This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Ms Lo Ree Ewing

Mailing Address

956 West Stafford Rd

City

Thousand Oaks

State

CA

Zip Code

91361

FEC ID number of contributing
federal political committee.Name of Employer
Retired

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 3 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.4195

B.

Full Name (Last, First, Middle Initial)

Mr. Gary Fenchuk

Mailing Address

14700 Village Square Place

City

Midlothian

State

VA

Zip Code

23112

FEC ID number of contributing
federal political committee.Name of Employer
East West Partners of Vir-
ginia

Occupation

CEO

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 8 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5586

C.

Full Name (Last, First, Middle Initial)

Mr. David W. Fenstermaker

Mailing Address

1825 Eye Street NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.Name of Employer
Info Requested

Occupation

V.P. of Investments

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 0 | 1 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5309

SUBTOTAL of Receipts This Page (optional)

3800.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mrs. Sharon Lo Flynn

Mailing Address

21 Vista Luci

City

Newport Coast

State

CA

Zip Code

92657

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 1 | 6 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4119

B.

Full Name (Last, First, Middle Initial)

Mr. William J. Flynn

Mailing Address

21 Vista Luci

City

Newport Coast

State

CA

Zip Code

92657

FEC ID number of contributing
federal political committee.

Name of Employer

Atlas Air

Occupation

CEO

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 1 | 6 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4117

C.

Full Name (Last, First, Middle Initial)

Mr. James A. Forbes

Mailing Address

143 Old Road

City

Westport

State

CT

Zip Code

06880

FEC ID number of contributing
federal political committee.

Name of Employer

Atlas Air

Occupation

VP Ground Operations

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 3 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5558

SUBTOTAL of Receipts This Page (optional)

5100.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Lawrence B. Gibbons

Mailing Address

100 Surrey Road

City

Elkins Park

State

PA

Zip Code

19027

FEC ID number of contributing
federal political committee.Name of Employer
Atlas Air

Occupation

Airline Executive

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 2 | 5 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5305

B.

Full Name (Last, First, Middle Initial)

Mrs. Margaret F. Gibbons

Mailing Address

100 Surrey Road

City

Elkins Park

State

PA

Zip Code

19027

FEC ID number of contributing
federal political committee.Name of Employer
Info Requested

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 2 | 5 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5307

C.

Full Name (Last, First, Middle Initial)

Mr. Rashid S. Gill

Mailing Address

6201 Franconia Road

City

Alexandria

State

VA

Zip Code

22310

FEC ID number of contributing
federal political committee.Name of Employer
Aabshar Restaurant

Occupation

Owner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 2 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5552

SUBTOTAL of Receipts This Page (optional)

5100.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. William Graves

Mailing Address

900 Whann Avenue

City

McLean

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.Name of Employer
American Trucking Associa-
tion

Occupation

CEO

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 2 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5660

B.

Full Name (Last, First, Middle Initial)

Mr. John Gregory

Mailing Address

9111 Peabody Street

City

Manassas

State

VA

Zip Code

20110

FEC ID number of contributing
federal political committee.Name of Employer
Gregory Construction, Inc.

Occupation

Construction

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 2 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5664

C.

Full Name (Last, First, Middle Initial)

Mr. Charles Griffith

Mailing Address

4209 S. Bellaire Circle

City

Cherry Hills Villa

State

CO

Zip Code

80113

FEC ID number of contributing
federal political committee.Name of Employer
Arcapita

Occupation

Finance

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 6 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5695

SUBTOTAL of Receipts This Page (optional)

5100.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

William Griffiths

Mailing Address

4901 Tarheel Way

City

Annandale

State

VA

Zip Code

22003

FEC ID number of contributing
federal political committee.Name of Employer
Eberle CommunicationsOccupation
CFO

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2006.12

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 3 | 0 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

0.00

In-kind - Postage Loan Forgiven

Transaction ID: SA17A.5854

B.

Full Name (Last, First, Middle Initial)

Mr. David W. Hanna

Mailing Address

908 Rembrandt Drive

City

Laguna Beach

State

CA

Zip Code

92651

FEC ID number of contributing
federal political committee.Name of Employer
Hanna CapitalOccupation
Executive

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 2 | 9 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5303

C.

Full Name (Last, First, Middle Initial)

Mrs. Virginia L. Hanna

Mailing Address

908 Rembrandt Drive

City

Laguna Beach

State

CA

Zip Code

92651

FEC ID number of contributing
federal political committee.Name of Employer
Hanna CapitalOccupation
Executive

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 2 | 8 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5301

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Ronald K. Harrell

Mailing Address

6428 Brentford Drive

City

Springfield

State

VA

Zip Code

22152

FEC ID number of contributing
federal political committee.Name of Employer
Braddock Road SunocoOccupation
Owner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 6 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

300.00

Contribution

Transaction ID: SA17A.5701

B.

Full Name (Last, First, Middle Initial)

Mr. Afzaal Hassan

Mailing Address

12510 Prosperity Drive

City

Silver Spring

State

MD

Zip Code

20904

FEC ID number of contributing
federal political committee.Name of Employer
American Mortgage Invest-
mentOccupation
Owner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 9 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5800

C.

Full Name (Last, First, Middle Initial)

Mr. Umar Hayat

Mailing Address

11534 Brockman Lane

City

Great Falls

State

VA

Zip Code

22066

FEC ID number of contributing
federal political committee.Name of Employer
Prime Executive ServiceOccupation
Owner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 2 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2000.00

Contribution

Transaction ID: SA17A.5443

SUBTOTAL of Receipts This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Umar Hayat

Mailing Address

11534 Brockman Lane

City

Great Falls

State

VA

Zip Code

22066

FEC ID number of contributing
federal political committee.Name of Employer
Prime Executive ServiceOccupation
Owner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 3 | 0 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5762

B.

Full Name (Last, First, Middle Initial)

Mr. William C. Heck

Mailing Address

5 Library Lane

City

Bronxville

State

NY

Zip Code

10708

FEC ID number of contributing
federal political committee.Name of Employer
Kelley DryeOccupation
Lawyer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5825

C.

Full Name (Last, First, Middle Initial)

Mr. Stephen Horton

Mailing Address

P.O. Box 17661

City

Richmond

State

VA

Zip Code

23226

FEC ID number of contributing
federal political committee.Name of Employer
Mc Guire WoodsOccupation
Public Affairs

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5597

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Richard Hotes

Mailing Address

9024 Vanguard Drive

Ste. 101

City

Anchorage

State

AK

Zip Code

99507

FEC ID number of contributing
federal political committee.

Name of Employer

Alaska Structures

Occupation

Sales

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 0 | 4 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5293

B.

Full Name (Last, First, Middle Initial)

Mr. Majid Hussain

Mailing Address

2809 Brian Court

City

Ellicott City

State

MD

Zip Code

21043

FEC ID number of contributing
federal political committee.

Name of Employer

Columbia Pike Shell

Occupation

Owner

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 2 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5456

C.

Full Name (Last, First, Middle Initial)

Hasan M Ibrahim

Mailing Address

866 Macalister Drive SE

City

Leesburg

State

VA

Zip Code

20175

FEC ID number of contributing
federal political committee.

Name of Employer

Keller Williams

Occupation

Consultant

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 2 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5448

SUBTOTAL of Receipts This Page (optional)

3800.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Hasan M Ibrahim

Mailing Address

866 Macalister Drive SE

City

Leesburg

State

VA

Zip Code

20175

FEC ID number of contributing
federal political committee.Name of Employer
Keller WilliamsOccupation
Consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 3 | 0 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

200.00

Contribution

Transaction ID: SA17A.5770

B.

Full Name (Last, First, Middle Initial)

Mr. Muhammad A Javaid

Mailing Address

14721 S. 88th Avenue

City

Orland Park

State

IL

Zip Code

60462

FEC ID number of contributing
federal political committee.Name of Employer
Raani CorporationOccupation
VP of Operations

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 2 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5548

C.

Full Name (Last, First, Middle Initial)

Mr. Baig M. Javed

Mailing Address

13108 Quate Lane

City

Woodbridge

State

VA

Zip Code

22192

FEC ID number of contributing
federal political committee.Name of Employer
Gas StationOccupation
Owner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 2 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.5468

SUBTOTAL of Receipts This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Hansford T. Johnson

Mailing Address

1705 Chesterford Way

City

McLean

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.Name of Employer
Retired

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 0 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5637

B.

Full Name (Last, First, Middle Initial)

Ayesha A. Kasuri

Mailing Address

11402 Summer House Court

City

Reston

State

VA

Zip Code

20194

FEC ID number of contributing
federal political committee.Name of Employer
Windsor Corp

Occupation

Mortgage Banker

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 1 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5802

C.

Full Name (Last, First, Middle Initial)

Mr. J. Paul Kerwin

Mailing Address

50 West 67th Street

Apt. 7C

City

New York

State

NY

Zip Code

10023

FEC ID number of contributing
federal political committee.Name of Employer
Dusquesne Capital

Occupation

Trader

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 9 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5632

SUBTOTAL of Receipts This Page (optional)

4300.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas P Kilgannon

Mailing Address

5704 Wood Creek Lane

City

Centreville

State

VA

Zip Code

20120

FEC ID number of contributing
federal political committee.Name of Employer
Info Requested

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 1 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.4184

B.

Full Name (Last, First, Middle Initial)

Mr. Walter H. Kleiner

Mailing Address

1725 89th Pl. N.E.

City

Clyde Hill

State

WA

Zip Code

98004

FEC ID number of contributing
federal political committee.Name of Employer
Retired

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 1 | 6 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.4243

C.

Full Name (Last, First, Middle Initial)

Mr. Adam L. Kokas

Mailing Address

360 East 88th Street

Apt. 24B

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing
federal political committee.Name of Employer
Atlas Air Worldwide

Occupation

Lawyer

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 6 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.5666

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. George Krill

Mailing Address

11517 Olde Tiverton Circle #304

City

State

Zip Code

Reston

VA

20194

FEC ID number of contributing
federal political committee.Name of Employer
Unitrans International,
Inc.

Occupation

Engineer

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 3 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

100.00

Contribution

Transaction ID: SA17A.5562

B.

Full Name (Last, First, Middle Initial)

LeClair Ryan

Mailing Address

1701 Pennsylvania Ave N.W. Suite 1045

City

State

Zip Code

Washington

DC

20006

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 0 | 1 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

10313.00

Exempt Legal Services

[MEMO ITEM]

Transaction ID: SA17A.5859

C.

Full Name (Last, First, Middle Initial)

Mr. Howard Lee

Mailing Address

6701 Democracy Blvd.

City

State

Zip Code

Bethesda

MD

20817

FEC ID number of contributing
federal political committee.Name of Employer
Cosmos Alliance

Occupation

Attorney / Partner

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 8 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5804

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Robert W. Logue

Mailing Address

11322 Idaho Avenue

#4794474

City

Los Angeles

State

CA

Zip Code

90025

FEC ID number of contributing
federal political committee.Name of Employer
Info Requested

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 2 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.4193

B.

Full Name (Last, First, Middle Initial)

Tammy Lyles-Cali

Mailing Address

3902 Pender Spring Dr.

City

Fairfax

State

VA

Zip Code

22033

FEC ID number of contributing
federal political committee.Name of Employer
Eberle Communications

Occupation

Vice President

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 3 | 0 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

0.00

In-kind - Postage Loan Forgiven

Transaction ID: SA17A.5856

C.

Full Name (Last, First, Middle Initial)

Mrs. Carrie Majeranowski

Mailing Address

12510 Queens Blvd.

911

City

Kew Gardens

State

NY

Zip Code

11415

FEC ID number of contributing
federal political committee.Name of Employer
St. Vincent Medical Group

Occupation

Ophthalmology Resident

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 3 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5565

SUBTOTAL of Receipts This Page (optional)

2550.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Peter Majeranowski

Mailing Address

12510 Queens Blvd

911

City

Kew Gardens

State

NY

Zip Code

11415

FEC ID number of contributing
federal political committee.Name of Employer
Self

Occupation

International Business Consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 3 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5563

B.

Full Name (Last, First, Middle Initial)

Ms Tehmina Malik

Mailing Address

1335 N. Rolling Road

City

Catonsville

State

MD

Zip Code

21228

FEC ID number of contributing
federal political committee.Name of Employer
Hotel Baltimore

Occupation

Owner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 2 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5441

C.

Full Name (Last, First, Middle Initial)

Ms Joyce Jonas Mason

Mailing Address

309 Carroll Avenue

City

Mamaroneck

State

NY

Zip Code

10543

FEC ID number of contributing
federal political committee.Name of Employer
IDT Corp

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5819

SUBTOTAL of Receipts This Page (optional)

3800.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Ivor Massey

Mailing Address

117 South 14th Street

Ste 300

City

Richmond

State

VA

Zip Code

23219

FEC ID number of contributing
federal political committee.Name of Employer
Triad, LLCOccupation
Executive

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 0 | 1 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5434

B.

Full Name (Last, First, Middle Initial)

Mr. Alan McClure

Mailing Address

3914 Club Drive

City

Atlanta

State

GA

Zip Code

30319

FEC ID number of contributing
federal political committee.Name of Employer
The Breckenridge Group,
Inc.Occupation
Investment Banker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5589

C.

Full Name (Last, First, Middle Initial)

Mr. John B. Metzger, III

Mailing Address

14819 Highway FF

City

Vichy

State

MT

Zip Code

65580

FEC ID number of contributing
federal political committee.Name of Employer
Retired

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.4295

SUBTOTAL of Receipts This Page (optional)

4300.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mrs. Tanveer A. Mirza

Mailing Address

11922 Safa Road

City

Herndon

State

VA

Zip Code

20170

FEC ID number of contributing
federal political committee.Name of Employer
Info Requested

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 3 | 0 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2000.00

Contribution

Transaction ID: SA17A.5759

B.

Full Name (Last, First, Middle Initial)

Mr. Yaqub M. Mirza

Mailing Address

11922 Safa Court

City

Herndon

State

VA

Zip Code

20170

FEC ID number of contributing
federal political committee.Name of Employer
Sterling Management

Occupation

CEO

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 1 | 1 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5371

C.

Full Name (Last, First, Middle Initial)

Mr. Fecerico G Morales

Mailing Address

4341 Americana Drive

#203

City

Annandale

State

VA

Zip Code

22003

FEC ID number of contributing
federal political committee.Name of Employer
Retired

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 2 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5452

SUBTOTAL of Receipts This Page (optional)

4800.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Edwin Mugford

Mailing Address

606 Cedar Run Rd

City

Manakin Sabot

State

VA

Zip Code

23103

FEC ID number of contributing
federal political committee.

Name of Employer

Royal Cheverolet

Occupation

Executive

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 7 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.4151

B.

Full Name (Last, First, Middle Initial)

Mr. Brad E. Mutschelknaus

Mailing Address

6336 Fairfax National Highway

City

Centreville

State

VA

Zip Code

20120

FEC ID number of contributing
federal political committee.

Name of Employer

Kelley Drye and Warren,
LLP

Occupation

Attorney/Partner

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

100.00

Contribution

Transaction ID: SA17A.5742

C.

Full Name (Last, First, Middle Initial)

Mr. Brad E. Mutschelknaus

Mailing Address

6336 Fairfax National Highway

City

Centreville

State

VA

Zip Code

20120

FEC ID number of contributing
federal political committee.

Name of Employer

Kelley Drye and Warren,
LLP

Occupation

Attorney/Partner

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

200.00

In-kind - Catering

Transaction ID: SA17A.5746

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Andrew Nicholson

Mailing Address

3512 Crums Church Road

City

Berryville

State

VA

Zip Code

22611

FEC ID number of contributing
federal political committee.Name of Employer
Gedoraw AmericaOccupation
Sales

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 9 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5753

B.

Full Name (Last, First, Middle Initial)

Ms Shawn K. Nicholson

Mailing Address

3512 Crums Church Road

City

Berryville

State

VA

Zip Code

22611

FEC ID number of contributing
federal political committee.Name of Employer
Info requested

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 9 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5755

C.

Full Name (Last, First, Middle Initial)

Mr. Jared R. Nodelman

Mailing Address

1253 Riker Drive

City

New Albany

State

OH

Zip Code

43054

FEC ID number of contributing
federal political committee.Name of Employer
Retired

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 0 | 4 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5285

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Charlie H. Ogburn

Mailing Address

3807 Vermont Road

City

Atlanta

State

GA

Zip Code

30319

FEC ID number of contributing
federal political committee.Name of Employer
ArcapitaOccupation
CEO

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 3 | 0 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5299

B.

Full Name (Last, First, Middle Initial)

Mr. John Pasco, III

Mailing Address

212 S. Mooreland Road

City

Richmond

State

VA

Zip Code

23229

FEC ID number of contributing
federal political committee.Name of Employer
Virginia Management Inves-
tmentOccupation
Financial Advisor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 3 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5554

C.

Full Name (Last, First, Middle Initial)

Mr. Max Pearson

Mailing Address

P.O. Box 35070

City

Richmond

State

VA

Zip Code

23225

FEC ID number of contributing
federal political committee.Name of Employer
Richmond HondaOccupation
Executive

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 2 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5805

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Dr. Hameed U. Peracha

Mailing Address

9421 Brian Jac Lane

City

Great Falls

State

VA

Zip Code

22066

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Physician

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 9 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4205

B.

Full Name (Last, First, Middle Initial)

Safia Peracha

Mailing Address

9421 Brian Jac Lane

City

Great Falls

State

VA

Zip Code

22066

FEC ID number of contributing
federal political committee.Name of Employer
Dr. Hameed Peracha

Occupation

Physician Assistant

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 9 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4207

C.

Full Name (Last, First, Middle Initial)

Mr. Gregory A. Peters

Mailing Address

3850 Club Drive

City

Atlanta

State

GA

Zip Code

30319

FEC ID number of contributing
federal political committee.Name of Employer
Nile Holdings, LLC

Occupation

Executive

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 2 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5680

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Leonard M. Pomata

Mailing Address

Courtland Farm,

P.O. Box 402

City

State

Zip Code

Aldie

VA

20105

FEC ID number of contributing
federal political committee.Name of Employer
RetiredOccupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 0 | 3 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2000.00

Contribution

Transaction ID: SA17A.5283

B.

Full Name (Last, First, Middle Initial)

Mr. Naveed Qureshi

Mailing Address

10803 Fournier Drive

City

State

Zip Code

Fairfax Station

VA

22039

FEC ID number of contributing
federal political committee.Name of Employer
SelfOccupation
CPA

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 3 | 0 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.4209

C.

Full Name (Last, First, Middle Initial)

Ms Michelle Rago

Mailing Address

1855 Calvert Street, NW

#101

City

State

Zip Code

Washington

DC

20009

FEC ID number of contributing
federal political committee.Name of Employer
Library of CongressOccupation
Librarian

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 1 | 5 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.4301

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. William Raines

Mailing Address

1129 Rivercrest Drive

City

Chattanooga

State

TN

Zip Code

37415

FEC ID number of contributing
federal political committee.

Name of Employer

The Raines Group, Inc

Occupation

Commercial Real Estate

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 3 | 0 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.4225

B.

Full Name (Last, First, Middle Initial)

Mrs. Maria Regirer

Mailing Address

9 Roslyn Hills Drive

City

Richmond

State

VA

Zip Code

23229

FEC ID number of contributing
federal political committee.Name of Employer
Information Requested Per
Best Efforts

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Occupation

Information Requested Per Best Efforts

Election Cycle-to-Date ▼

350.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 6 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.5678

C.

Full Name (Last, First, Middle Initial)

Mr. J.G. Reid

Mailing Address

P.O. Box 29721

City

Richmond

State

VA

Zip Code

23242

FEC ID number of contributing
federal political committee.

Name of Employer

Homemaker

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 8 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4211

SUBTOTAL of Receipts This Page (optional)

3550.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. William H. Reno

Mailing Address

2706 S. Ives Street

City

Arlington

State

VA

Zip Code

22202

FEC ID number of contributing
federal political committee.Name of Employer
Retired

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 3 | 0 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.4233

B.

Full Name (Last, First, Middle Initial)

Mr. David Rensin

Mailing Address

19588 Glastonbury Ln

City

Leesburg

State

VA

Zip Code

20175

FEC ID number of contributing
federal political committee.Name of Employer
Reality Mobile, LLCOccupation
C.E.O.

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 7 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4143

C.

Full Name (Last, First, Middle Initial)

Mrs. Lia Rensin

Mailing Address

19588 Glastonbury Ln

City

Leesburg

State

VA

Zip Code

20175

FEC ID number of contributing
federal political committee.Name of Employer
SelfOccupation
Homemaker

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 7 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4145

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph E. Robert

Mailing Address

P.O. Box 7456

City

McLean

State

VA

Zip Code

22106

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Real Estate Development

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 1 | 4 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2000.00

Contribution

Transaction ID: SA17A.5369

B.

Full Name (Last, First, Middle Initial)

Mr. Chris Rothlis

Mailing Address

2261 Grady Ridge Road

City

Duluth

State

GA

Zip Code

30097

FEC ID number of contributing
federal political committee.Name of Employer
Cypress Communications

Occupation

Telecommunications

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 2 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.5693

C.

Full Name (Last, First, Middle Initial)

Mr. John Gerard Ryan

Mailing Address

1432 Highwood Drive

City

McLean

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.Name of Employer
Bristol Meyers Squibb

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 0 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5639

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. M. Yasir Saleem

Mailing Address

21366 Marble Chip Court

City

Ashburn

State

VA

Zip Code

20147

FEC ID number of contributing
federal political committee.Name of Employer
Verisign

Occupation

Software Engineer

Receipt For: 2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 2 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5454

B.

Full Name (Last, First, Middle Initial)

Mr. Mohammad Siddique Sheikh

Mailing Address

4215 Roeburn Court

City

Woodbridge

State

VA

Zip Code

22192

FEC ID number of contributing
federal political committee.Name of Employer
M.S.S. Enterprise/Paba

Occupation

President

Receipt For: 2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 2 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5464

C.

Full Name (Last, First, Middle Initial)

Ms Jennifer Slatten

Mailing Address

43261 Katie Leigh Court

City

Ashburn

State

VA

Zip Code

20147

FEC ID number of contributing
federal political committee.Name of Employer
Duer Advanced Technology &
Aer

Occupation

Controller

Receipt For: 2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 1 | 6 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.4305

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Albert H. Small

Mailing Address

7116 Glenbrook Road

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing
federal political committee.Name of Employer
Info requestedOccupation
Engineer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 7 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4219

B.

Full Name (Last, First, Middle Initial)

Mr. Evan Snapper

Mailing Address

57 Saxonwood Road

City

Fairfield

State

CT

Zip Code

06825

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation
Financial Advisor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5582

C.

Full Name (Last, First, Middle Initial)

Mrs. Michelle Snapper

Mailing Address

57 Saxonwood Road

City

Fairfield

State

CT

Zip Code

06825

FEC ID number of contributing
federal political committee.Name of Employer
Info Requested

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.5584

SUBTOTAL of Receipts This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mrs. Carolyn K. Snow

Mailing Address

122 Tempsford Lane

City

Richmond

State

VA

Zip Code

23226

FEC ID number of contributing
federal political committee.Name of Employer
Homemaker

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 1 | 3 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4201

B.

Full Name (Last, First, Middle Initial)

Mr. John W. Snow

Mailing Address

122 Tempsford Lane

City

Richmond

State

VA

Zip Code

23226

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Consultant

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 1 | 3 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4199

C.

Full Name (Last, First, Middle Initial)

Mr. Leon Stepanian, Jr.

Mailing Address

1580 Millers Lane

City

Manakin Sabot

State

VA

Zip Code

23103

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Beer Distributor

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 6 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4217

SUBTOTAL of Receipts This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. George Stephan

Mailing Address

132 Westmont Street

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing
federal political committee.Name of Employer
Retired

Occupation

Receipt For:

2008

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 3 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5556

B.

Full Name (Last, First, Middle Initial)

Mr. Merrill B. Stone

Mailing Address

4 Pumpkin Hill

City

Westport

State

CT

Zip Code

06880

FEC ID number of contributing
federal political committee.Name of Employer
Kelley DryeOccupation
Lawyer

Receipt For:

2008

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 8 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5821

C.

Full Name (Last, First, Middle Initial)

Mr. Ray M. Tate

Mailing Address

565 Ice Pond Cove

City

Manakin-Sabot

State

VA

Zip Code

23103

FEC ID number of contributing
federal political committee.Name of Employer
Auto DealershipOccupation
Owner

Receipt For:

2008

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 3 | 1 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5311

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Ashley L. Taylor, Jr.

Mailing Address

4303 Hanover Ave

City

Richmond

State

VA

Zip Code

23221

FEC ID number of contributing
federal political committee.Name of Employer
Troutman SaundersOccupation
Attorney

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 0 | 8 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.5313

B.

Full Name (Last, First, Middle Initial)

Mr. Dennis Treacy

Mailing Address

8123 Liberty Oaks Lane

City

Hanover

State

PA

Zip Code

23069

FEC ID number of contributing
federal political committee.Name of Employer
Smithfield FoodsOccupation
VP of Environmental Affairs

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 1 | 1 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.5398

C.

Full Name (Last, First, Middle Initial)

Mr. Ronald Trowbridge

Mailing Address

8304 Larkmeade Terrace

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing
federal political committee.Name of Employer
RS Info SystemsOccupation
COO

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 7 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

2300.00

Contribution

Transaction ID: SA17A.4167

SUBTOTAL of Receipts This Page (optional)

3050.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Ms Kelly J. Waite

Mailing Address

5327 Sandy Point Lane

City

Clifton

State

VA

Zip Code

20124

FEC ID number of contributing
federal political committee.Name of Employer
Info Requested

Occupation

Info Requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 1 | 0 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

500.00

Contribution

Transaction ID: SA17A.4321

B.

Full Name (Last, First, Middle Initial)

Mrs. Cecilia Y. Wallace

Mailing Address

295 Mill Creek Court

City

Acworth

State

GA

Zip Code

30101

FEC ID number of contributing
federal political committee.Name of Employer
Wallace and Wallace, INC.

Occupation

Partner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 2 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.5691

C.

Full Name (Last, First, Middle Initial)

Mr. Charles Ward

Mailing Address

9087 Meadowrun Way

City

San Diego

State

CA

Zip Code

92129

FEC ID number of contributing
federal political committee.Name of Employer
Northrop Grumman

Occupation

Engineer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 1 | 1 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

250.00

Contribution

Transaction ID: SA17A.5405

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Larry C. Williams

Mailing Address

945 East Paces Ferry Road

Ste 1250

City

Atlanta

State

GA

Zip Code

30326

FEC ID number of contributing
federal political committee.Name of Employer
Info Requested

Occupation

Info Requested

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 8 | / | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17A.5591

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

164100.00

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 118

(check only one)

| | | | | | |
|------------------------------|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input checked="" type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Bob Barr Leadership Fund

Mailing Address

4401 Northside Parkway

Suite 100

City

Atlanta

State

GA

Zip Code

30327

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 3 | 0 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

1000.00

Contribution

Transaction ID: SA17C.5291

B.

Full Name (Last, First, Middle Initial)

The Freedom's Defense Fund

Mailing Address

1601 5th Street, NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 1 | 0 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

5000.00

In-kind - event catering
and site rental

Transaction ID: SA17C.5538

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

6000.00

Schedule A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 118

(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input checked="" type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

James Gilmore

Mailing Address

PO Box 19128

City

Alexandria

State

VA

Zip Code

22320

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ X

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 7

Amount of Each Receipt this Period

2000.00

From Personal Funds

Transaction ID: SA19A.5436

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 118

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input checked="" type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

BB&T

Mailing Address

1909 K St., Nw

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

6102.96

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 3 | 0 | | 2 | 0 | 0 | 7 |

Amount of Each Receipt this Period

3700.00

Overdraft Protection

Transaction ID: SA19B.5869

SUBTOTAL of Receipts This Page (optional)

3700.00

TOTAL This Period (last page this line number only)

3700.00

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 57 / 118

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Affordable Computer Rentals

Mailing Address 21760 Beaumeade Circle
Suite 170

City Ashburn State VA Zip Code 22150

Purpose of Disbursement
Computer Rentals

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5515

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

1522.50

B.

Full Name (Last, First, Middle Initial)

Affordable Computer Rentals

Mailing Address 21760 Beaumeade Circle
Suite 170

City Ashburn State VA Zip Code 22150

Purpose of Disbursement
Computer Rental

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5644

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

1557.50

C.

Full Name (Last, First, Middle Initial)

Affordable Creative Services

Mailing Address 42395 Ryan Road
Suite 112-802

City Brambleton State VA Zip Code 20148

Purpose of Disbursement
Website Design

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5491

Date of Disbursement

04 / 10 / 2007

Amount of Each Disbursement this Period

5937.50

SUBTOTAL of Disbursements This Page (optional)

9017.50

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 58 / 118

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

BB&T Bankcard

Mailing Address 1365 Wisconsin Ave.

City
Washington

State
DC

Zip Code
20007

Purpose of Disbursement
Credit Card Payment See Memos

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5579

Date of Disbursement

04 / 17 / 2007

Amount of Each Disbursement this Period

2600.00

B.

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 6731 Frontier Drive

City
Springfield

State
VA

Zip Code
22150

Purpose of Disbursement
Office Supplies

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5579.0

Date of Disbursement

04 / 17 / 2007

Amount of Each Disbursement this Period

1038.80

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Affordable Computer Rentals

Mailing Address 21760 Beaumeade Circle
Suite 170

City
Ashburn

State
VA

Zip Code
22150

Purpose of Disbursement
Computer Rentals

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5579.1

Date of Disbursement

04 / 17 / 2007

Amount of Each Disbursement this Period

1557.50

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

2600.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 59 / 118

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) Benjamin Bishop Mailing Address 3500 SW 12th Pl. | Transaction ID: SB23.5598 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 7</div> </div> |
| City Des Moines State IA Zip Code 50315 Purpose of Disbursement Strategic Consulting Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Amount of Each Disbursement this Period <div>2500.00</div> <div>101 Category/Type</div> |
| B. Full Name (Last, First, Middle Initial) Benjamin Bishop Mailing Address 3500 SW 12th Pl. | Transaction ID: SB23.5607 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 0 7</div> </div> |
| City Des Moines State IA Zip Code 50315 Purpose of Disbursement Strategic Consulting Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Amount of Each Disbursement this Period <div>2500.00</div> <div>101 Category/Type</div> |
| C. Full Name (Last, First, Middle Initial) Benjamin Bishop Mailing Address 3500 SW 12th Pl. | Transaction ID: SB23.5615 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div> |
| City Des Moines State IA Zip Code 50315 Purpose of Disbursement Strategic Consulting Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Amount of Each Disbursement this Period <div>2500.00</div> <div>101 Category/Type</div> |

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 60 / 118

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) Benjamin Bishop Mailing Address 3500 SW 12th Pl. | Transaction ID: SB23.5545 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 7</div> </div> |
| City Des Moines State IA Zip Code 50315 Purpose of Disbursement Strategic Consultant Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Amount of Each Disbursement this Period <div>2500.00</div> <div>101 Category/ Type</div> |
| B. Full Name (Last, First, Middle Initial) Benjamin Bishop Mailing Address 3500 SW 12th Pl. | Transaction ID: SB23.5620 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 1 / 2 0 0 7</div> </div> |
| City Des Moines State IA Zip Code 50315 Purpose of Disbursement Strategic Consulting Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Amount of Each Disbursement this Period <div>2500.00</div> <div>101 Category/ Type</div> |
| C. Full Name (Last, First, Middle Initial) Benjamin Bishop Mailing Address 3500 SW 12th Pl. | Transaction ID: SB23.5626 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 7</div> </div> |
| City Des Moines State IA Zip Code 50315 Purpose of Disbursement Strategic Consulting Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Amount of Each Disbursement this Period <div>2500.00</div> <div>101 Category/ Type</div> |

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 61 / 118

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|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Tom Bunnell

Mailing Address PO Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Strategic Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5600

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

3500.00

B.

Full Name (Last, First, Middle Initial)

Tom Bunnell

Mailing Address PO Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Travel expense

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5500

Date of Disbursement

04 / 13 / 2007

Amount of Each Disbursement this Period

94.86

C.

Full Name (Last, First, Middle Initial)

Tom Bunnell

Mailing Address PO Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Strategic Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5608

Date of Disbursement

04 / 13 / 2007

Amount of Each Disbursement this Period

3500.00

SUBTOTAL of Disbursements This Page (optional)

7094.86

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 62 / 118

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|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Tom Bunnell

Mailing Address PO Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Travel Expense

Candidate Name

101

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5509

Date of Disbursement

/ /

Amount of Each Disbursement this Period

92.64

B.

Full Name (Last, First, Middle Initial)

Tom Bunnell

Mailing Address PO Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Travel expense

Candidate Name

101

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5518

Date of Disbursement

/ /

Amount of Each Disbursement this Period

129.71

C.

Full Name (Last, First, Middle Initial)

Tom Bunnell

Mailing Address PO Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Strategic Consulting

Candidate Name

101

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5614

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3500.00

SUBTOTAL of Disbursements This Page (optional)

3722.35

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 63 / 118

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|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) Tom Bunnell Mailing Address PO Box 19128 | Transaction ID: SB23.5541 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 7</div> </div> |
| City Alexandria State VA Zip Code 22320 Purpose of Disbursement Strategic Consultant Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Amount of Each Disbursement this Period <div>3500.00</div> |
| B. Full Name (Last, First, Middle Initial) Tom Bunnell Mailing Address PO Box 19128 City Alexandria State VA Zip Code 22320 Purpose of Disbursement Travel Expenses Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Transaction ID: SB23.5531 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 5 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>259.42</div> |
| C. Full Name (Last, First, Middle Initial) Tom Bunnell Mailing Address PO Box 19128 City Alexandria State VA Zip Code 22320 Purpose of Disbursement Strategic Consulting/Travel Expenses Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Transaction ID: SB23.5624 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 1 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>4007.94</div> |

SUBTOTAL of Disbursements This Page (optional) ►

7767.36

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 64 / 118

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) Tom Bunnell Mailing Address PO Box 19128 | Transaction ID: SB23.5627 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 7</div> </div> |
| City Alexandria State VA Zip Code 22320 Purpose of Disbursement Strategic Consulting Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Amount of Each Disbursement this Period <div>3500.00</div> <div>101 Category/Type</div> |
| B. Full Name (Last, First, Middle Initial) C-PAC Mailing Address 1007 Cameron Street City Alexandria State VA Zip Code 22314 Purpose of Disbursement Vendor Booth Expenses Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Transaction ID: SB23.5836 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 5 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>1500.00</div> <div>101 Category/Type</div> |
| C. Full Name (Last, First, Middle Initial) Ms Carol Comstock Mailing Address City Richmond State VA Zip Code Purpose of Disbursement Fundraising Consulting Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Transaction ID: SB23.5605 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 7 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>4000.00</div> <div>101 Category/Type</div> |

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 65 / 118

| | | | | |
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| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) Cox Communications Mailing Address PO Box 830217 | Transaction ID: SB23.5540 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 5 / 2 0 0 7</div> </div> |
| City Baltimore State MD Zip Code 20171 Purpose of Disbursement Phone Expense Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Amount of Each Disbursement this Period <div>305.40</div> <div>101 Category/ Type</div> |
| B. Full Name (Last, First, Middle Initial) Ms. Egan E. Crover Mailing Address P.O. Box 19128 | Transaction ID: SB23.5602 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 7</div> </div> |
| City Alexandria State VA Zip Code 22320 Purpose of Disbursement Compliance Consulting Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Amount of Each Disbursement this Period <div>2750.00</div> <div>101 Category/ Type</div> |
| C. Full Name (Last, First, Middle Initial) Ms. Egan E. Crover Mailing Address P.O. Box 19128 | Transaction ID: SB23.5612 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 0 7</div> </div> |
| City Alexandria State VA Zip Code 22320 Purpose of Disbursement Compliance Consulting Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Amount of Each Disbursement this Period <div>2750.00</div> <div>101 Category/ Type</div> |

SUBTOTAL of Disbursements This Page (optional) ►

5805.40

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 66 / 118

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Ms. Egan E. Crover

Mailing Address P.O. Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Compliance Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5613

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

2750.00

B.

Full Name (Last, First, Middle Initial)

Ms. Egan E. Crover

Mailing Address P.O. Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Computer Service

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5528

Date of Disbursement

05 / 04 / 2007

Amount of Each Disbursement this Period

782.61

C.

Full Name (Last, First, Middle Initial)

Ms. Egan E. Crover

Mailing Address P.O. Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Compliance Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.4136

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

2750.00

SUBTOTAL of Disbursements This Page (optional)

6282.61

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 67 / 118

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|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Ms. Egan E. Crover

Mailing Address P.O. Box 19128

City Alexandria State VA Zip Code 22320

Purpose of Disbursement
Compliance Consultant

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5542

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

2750.00

B.

Full Name (Last, First, Middle Initial)

Ms. Egan E. Crover

Mailing Address P.O. Box 19128

City Alexandria State VA Zip Code 22320

Purpose of Disbursement
Compliance Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5625

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

2750.00

C.

Full Name (Last, First, Middle Initial)

Denzenhall Resources

Mailing Address 1130 Connecticut Ave., NW
Suite 600

City Washington State DC Zip Code 20036

Purpose of Disbursement
Media Consultant

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5522

Date of Disbursement

05 / 04 / 2007

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 68 / 118

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|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Denzenhall Resources | Transaction ID: SB23.5651 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 1130 Connecticut Ave., NW Suite 600 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | | 1 | 8 | | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 6 | | 1 | 8 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | |
| City Washington State DC Zip Code 20036 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Media Consulting Candidate Name | <table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table> | 5000.00 | | | | | | | | | | | | | | | | | | | |
| 5000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Mr. Peter Foster | Transaction ID: SB23.5498 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 5601 Turkey Oak Road | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 1 | 0 | | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 4 | | 1 | 0 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | |
| City Richmond State VA Zip Code 23237 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel expense Candidate Name | <table border="1"> <tr> <td colspan="10">833.49</td> </tr> </table> | 833.49 | | | | | | | | | | | | | | | | | | | |
| 833.49 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Mr. Peter Foster | Transaction ID: SB23.5501 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 5601 Turkey Oak Road | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 1 | 3 | | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 4 | | 1 | 3 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | |
| City Richmond State VA Zip Code 23237 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Fundraising Consultant/Mileage Candidate Name | <table border="1"> <tr> <td colspan="10">902.28</td> </tr> </table> | 902.28 | | | | | | | | | | | | | | | | | | | |
| 902.28 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

6735.77

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 69 / 118

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Mr. Peter Foster | Transaction ID: SB23.5527 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 5601 Turkey Oak Road | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 5 | | 1 | 6 | | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 5 | | 1 | 6 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | |
| City Richmond State VA Zip Code 23237 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel expense/fundraising consulting Candidate Name | <table border="1"> <tr> <td colspan="10">1144.26</td> </tr> </table> | 1144.26 | | | | | | | | | | | | | | | | | | | |
| 1144.26 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) James Gilmore | Transaction ID: SB23.5619 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 19128 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 5 | | 2 | 2 | | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 5 | | 2 | 2 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | |
| City Alexandria State VA Zip Code 22320 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel Expenses Candidate Name | <table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table> | 5000.00 | | | | | | | | | | | | | | | | | | | |
| 5000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Dan Kreske | Transaction ID: SB23.5485 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 19128 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 0 | 5 | | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 4 | | 0 | 5 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | |
| City Alexandria State VA Zip Code 22320 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel expenses Candidate Name | <table border="1"> <tr> <td colspan="10">300.67</td> </tr> </table> | 300.67 | | | | | | | | | | | | | | | | | | | |
| 300.67 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

6444.93

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 70 / 118

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Dan Kreske

Mailing Address PO Box 19128

City Alexandria State VA Zip Code 22320

Purpose of Disbursement
Fundraising Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5611

Date of Disbursement

04 / 13 / 2007

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Dan Kreske

Mailing Address PO Box 19128

City Alexandria State VA Zip Code 22320

Purpose of Disbursement
Fundraising Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5617

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Dan Kreske

Mailing Address PO Box 19128

City Alexandria State VA Zip Code 22320

Purpose of Disbursement
Fundraising Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5628

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 71 / 118

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Dan Kreske

Mailing Address PO Box 19128

City Alexandria State VA Zip Code 22320

Purpose of Disbursement
Fundraising Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5623

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Dan Kreske

Mailing Address PO Box 19128

City Alexandria State VA Zip Code 22320

Purpose of Disbursement
Fundraising Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5629

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

LeClair Ryan

Mailing Address 1701 Pennsylvania Ave N.W.
Suite 1045

City Washington State DC Zip Code 20006

Purpose of Disbursement
Exempt Legal Services

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5858

Date of Disbursement

04 / 01 / 2007

Amount of Each Disbursement this Period

10313.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 72 / 118

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) Dick Leggitt Mailing Address PO Box 192 | Transaction ID: SB23.5499 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 0 7</div> </div> |
| City Colonial Beach State VA Zip Code 22443 Purpose of Disbursement Strategic Consulting Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Amount of Each Disbursement this Period <div>2500.00</div> <div>101 Category/Type</div> |
| B. Full Name (Last, First, Middle Initial) Dick Leggitt Mailing Address PO Box 192 | Transaction ID: SB23.5514 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div> |
| City Colonial Beach State VA Zip Code 22443 Purpose of Disbursement Strategic Consulting Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Amount of Each Disbursement this Period <div>2500.00</div> <div>101 Category/Type</div> |
| C. Full Name (Last, First, Middle Initial) Dick Leggitt Mailing Address PO Box 192 | Transaction ID: SB23.5526 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 7</div> </div> |
| City Colonial Beach State VA Zip Code 22443 Purpose of Disbursement Strategic Consultant Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Amount of Each Disbursement this Period <div>2500.00</div> <div>101 Category/Type</div> |

SUBTOTAL of Disbursements This Page (optional) ►

7500.00

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 73 / 118

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Dick Leggitt

Mailing Address PO Box 192

City
Colonial Beach

State
VA

Zip Code
22443

Purpose of Disbursement
Strategic Consultant

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5534

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

550.00

B.

Full Name (Last, First, Middle Initial)

Dick Leggitt

Mailing Address PO Box 192

City
Colonial Beach

State
VA

Zip Code
22443

Purpose of Disbursement
Strategic Consultant

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5529

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

1950.00

C.

Full Name (Last, First, Middle Initial)

Dick Leggitt

Mailing Address PO Box 192

City
Colonial Beach

State
VA

Zip Code
22443

Purpose of Disbursement
Strategic Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5479

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 74 / 118

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Jesse Mallory

Mailing Address P.O. Box 330043
10430 Lincoln St.

City Northglen State CO Zip Code 80233

Purpose of Disbursement
Web Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5599

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

750.00

B.

Full Name (Last, First, Middle Initial)

Mr. Jesse Mallory

Mailing Address P.O. Box 330043
10430 Lincoln St.

City Northglen State CO Zip Code 80233

Purpose of Disbursement
Web Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5610

Date of Disbursement

04 / 13 / 2007

Amount of Each Disbursement this Period

750.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jesse Mallory

Mailing Address P.O. Box 330043
10430 Lincoln St.

City Northglen State CO Zip Code 80233

Purpose of Disbursement
Web Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5616

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

750.00

SUBTOTAL of Disbursements This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 75 / 118

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Jesse Mallory

Mailing Address P.O. Box 330043
10430 Lincoln St.

City Northglen State CO Zip Code 80233

Purpose of Disbursement
Web Consultant

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5544

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

750.00

B.

Full Name (Last, First, Middle Initial)

Mr. Jesse Mallory

Mailing Address P.O. Box 330043
10430 Lincoln St.

City Northglen State CO Zip Code 80233

Purpose of Disbursement
Web Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5622

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

750.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jesse Mallory

Mailing Address P.O. Box 330043
10430 Lincoln St.

City Northglen State CO Zip Code 80233

Purpose of Disbursement
Web Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5630

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

750.00

SUBTOTAL of Disbursements This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 76 / 118

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| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Marcus Consulting, LLC

Mailing Address 25 East Main Street

City Richmond State VA Zip Code 23219

Purpose of Disbursement
Strategic Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5718

Date of Disbursement

04 / 17 / 2007

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Marcus Consulting, LLC

Mailing Address 25 East Main Street

City Richmond State VA Zip Code 23219

Purpose of Disbursement
Strategic Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5717

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Marcus Consulting, LLC

Mailing Address 25 East Main Street

City Richmond State VA Zip Code 23219

Purpose of Disbursement
Strategic Consulting/Travel

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5719

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

6892.60

SUBTOTAL of Disbursements This Page (optional)

16892.60

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 77 / 118

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mercury Public Affairs, LLC

Mailing Address 137 Fifth Avenue
3rd Floor

City State Zip Code
New York NY 10010

Purpose of Disbursement
Travel

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5722

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

2042.40

B.

Full Name (Last, First, Middle Initial)

National Telephone Corporation

Mailing Address P.O. Box 1145

City State Zip Code
Newington VA 22122

Purpose of Disbursement
Telephone Repair

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5489

Date of Disbursement

04 / 10 / 2007

Amount of Each Disbursement this Period

605.00

C.

Full Name (Last, First, Middle Initial)

National Telephone Corporation

Mailing Address P.O. Box 1145

City State Zip Code
Newington VA 22122

Purpose of Disbursement
Telephone repair

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5532

Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

170.00

SUBTOTAL of Disbursements This Page (optional)

2817.40

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 78 / 118

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NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Nova Label

Mailing Address 4819 Lydell Rd.

City Cheverly State MD Zip Code 20781

Purpose of Disbursement

Direct Mail Production

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5571

Date of Disbursement

06 / 08 / 2007

Amount of Each Disbursement this Period

871.29

B.

Full Name (Last, First, Middle Initial)

Omega List Co.

Mailing Address 1420 Spring Hill Rd., #490

City McLean State VA Zip Code 22102

Purpose of Disbursement

Direct Mail List

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5573

Date of Disbursement

04 / 24 / 2007

Amount of Each Disbursement this Period

1618.65

C.

Full Name (Last, First, Middle Initial)

Sam Pimm

Mailing Address PO Box 68

City Starham State NH Zip Code 03885

Purpose of Disbursement

Travel Expenses

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5482

Date of Disbursement

04 / 03 / 2007

Amount of Each Disbursement this Period

527.47

SUBTOTAL of Disbursements This Page (optional)

3017.41

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 79 / 118

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Political Ink

Mailing Address 12936 Ashtree Rd.

City
Midlothian

State
VA

Zip Code
23114

Purpose of Disbursement
Printing

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5575

Date of Disbursement

04 / 10 / 2007

Amount of Each Disbursement this Period

6550.00

B.

Full Name (Last, First, Middle Initial)

Property Services, Inc.

Mailing Address 6320 Augusta Dr.
#1400

City
Springfield

State
VA

Zip Code
22150

Purpose of Disbursement
Rent

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5517

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

3500.00

C.

Full Name (Last, First, Middle Initial)

Property Services, Inc.

Mailing Address 6320 Augusta Dr.
#1400

City
Springfield

State
VA

Zip Code
22150

Purpose of Disbursement
Rent

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5533

Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

3500.00

SUBTOTAL of Disbursements This Page (optional)

13550.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 80 / 118

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Roberts, Raheb and Gradler, LLC

Mailing Address 805 15th Street NW
Suite 1101

City Washington State DC Zip Code 20005

Purpose of Disbursement
Strategic Consulting Services

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5524

Date of Disbursement

05 / 04 / 2007

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

SOUTH CAROLINA REPUBLICAN PARTY

Mailing Address P O Box 12373

City Columbia State SC Zip Code 29211

Purpose of Disbursement
Primary Filing Fee

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.4106

Date of Disbursement

04 / 27 / 2007

Amount of Each Disbursement this Period

25000.00

C.

Full Name (Last, First, Middle Initial)

Spectrum Printing

Mailing Address 95 Eddy Road
Suite 101

City Manchester State NH Zip Code 03102

Purpose of Disbursement
Printing expense

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5493

Date of Disbursement

04 / 10 / 2007

Amount of Each Disbursement this Period

220.67

SUBTOTAL of Disbursements This Page (optional)

30220.67

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 81 / 118

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 6731 Frontier Drive

City
Springfield

State
VA

Zip Code
22150

Purpose of Disbursement
Office Supplies

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5484

Date of Disbursement

04 / 05 / 2007

Amount of Each Disbursement this Period

174.70

B.

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 6731 Frontier Drive

City
Springfield

State
VA

Zip Code
22150

Purpose of Disbursement
Office Supplies

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.4115

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

36.70

C.

Full Name (Last, First, Middle Initial)

State Farm Insurance

Mailing Address 7406 Alban Station
Suite A108

City
Springfield

State
VA

Zip Code
22150

Purpose of Disbursement
Liability Insurance

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5502

Date of Disbursement

04 / 16 / 2007

Amount of Each Disbursement this Period

525.00

SUBTOTAL of Disbursements This Page (optional)

736.40

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 82 / 118

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| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Anthony Surace

Mailing Address P.O. Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Web Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5601

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

750.00

B.

Full Name (Last, First, Middle Initial)

Mr. Anthony Surace

Mailing Address P.O. Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Web Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5609

Date of Disbursement

04 / 13 / 2007

Amount of Each Disbursement this Period

750.00

C.

Full Name (Last, First, Middle Initial)

Mr. Anthony Surace

Mailing Address P.O. Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Web Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5618

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

750.00

SUBTOTAL of Disbursements This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 83 / 118

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Mr. Anthony Surace

Mailing Address P.O. Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Website Design Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.4137

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

750.00

B.

Full Name (Last, First, Middle Initial)

Mr. Anthony Surace

Mailing Address P.O. Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Web Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5621

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

750.00

C.

Full Name (Last, First, Middle Initial)

Mr. Anthony Surace

Mailing Address P.O. Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Web Consulting

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5631

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

750.00

SUBTOTAL of Disbursements This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 84 / 118

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| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

| | |
|---|---|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Tele-Town Hall Services</p> <p>Mailing Address 5101 MacArthur Blvd. NW Suite 200</p> <p>City Washington State DC Zip Code 20016</p> <p>Purpose of Disbursement Telephonic Announcement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB23.5510</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 755.89</p> <p>101 Category/ Type</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) The Freedom's Defense Fund</p> <p>Mailing Address 1601 5th Street, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement In-kind - event catering and site rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB23.5539</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>Category/ Type</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) U.S. Postmaster</p> <p>Mailing Address Post Office</p> <p>City Woodbridge State VA Zip Code 22191</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB23.5654</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 209.41</p> <p>101 Category/ Type</p> |

SUBTOTAL of Disbursements This Page (optional)

5965.30

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 85 / 118

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P.O. Box 17120 | Transaction ID: SB23.5504 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 7</div> </div> |
| City Tucson State AZ Zip Code 95731 Purpose of Disbursement Wireless phone expense Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Amount of Each Disbursement this Period <div>1676.42</div> |
| B. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P.O. Box 17120 City Tucson State AZ Zip Code 95731 Purpose of Disbursement Wireless phone expense Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Transaction ID: SB23.5506 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>201.89</div> |
| C. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P.O. Box 17120 City Tucson State AZ Zip Code 95731 Purpose of Disbursement Wireless Phone Bill Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | Transaction ID: SB23.5650 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 8 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>1200.00</div> |

SUBTOTAL of Disbursements This Page (optional) ►

3078.31

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 86 / 118

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

Willett Systems

Mailing Address 445 N. Mechanic St.

City State Zip Code
Cumberland MD 21502

Purpose of Disbursement
Website Maintenance

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5665

Date of Disbursement

06 / 22 / 2007

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Mr. Brian Williams

Mailing Address 1301 Vermont Ave., NW
#605

City State Zip Code
Washington DC 20005

Purpose of Disbursement
Internet Management

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5519

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

3780.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jim Wilson

Mailing Address P.O. Box 77

City State Zip Code
Rolve IA 50581

Purpose of Disbursement
Moving expenses

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5486

Date of Disbursement

04 / 04 / 2007

Amount of Each Disbursement this Period

341.76

SUBTOTAL of Disbursements This Page (optional)

9121.76

TOTAL This Period (last page this line number only)

209370.63

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 87 / 118

| | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|---|
| <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input checked="" type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

James Gilmore

Mailing Address PO Box 19128

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement
Loan Payment

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB27A.5568

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 88 / 118

| | | | | |
|---|------------------------------|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input checked="" type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

JIM GILMORE FOR PRESIDENT

A.

Full Name (Last, First, Middle Initial)

BB&T

Mailing Address 1909 K St., Nw

City
Washington

State
DC

Zip Code
20006

Purpose of Disbursement
Loan Payment

Candidate Name

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB27B.5578

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2400.00

SUBTOTAL of Disbursements This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

2400.00

Schedule C-P

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 89 / 118

LOANS

FOR LINE NUMBER:
(check only one)☒ 19a
☐ 19bNAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5436

LOAN SOURCE Full Name (Last, First, Middle Initial)
James Gilmore

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address PO Box 19128

City Alexandria State VA ZIP Code 22320

Original Amount of Loan

2000.00

Cumulative Payment To Date

2000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 5D D
3 1Y Y Y Y
2 0 0 7

0.0000 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 90 / 118

LOANS

FOR LINE NUMBER:
(check only one)☐ 19a
☒ 19bNAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5134

LOAN SOURCE Full Name (Last, First, Middle Initial)
Brian Anderson

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 5315 Connecticut Ave., #608

City Washington State DC ZIP Code 20015

Original Amount of Loan

2300.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2300.00

TERMS

Date Incurred

M M D D Y Y Y Y
0 3 0 6 2 0 0 7

Date Due

Upon Demand

Interest Rate

0.0000 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

2300.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 91 / 118

LOANS

FOR LINE NUMBER:
(check only one)☐ 19a
☒ 19bNAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5278

LOAN SOURCE Full Name (Last, First, Middle Initial)
BB&T

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1909 K St., Nw

City Washington State DC ZIP Code 20006

Original Amount of Loan

2400.00

Cumulative Payment To Date

2400.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M M D D Y Y Y Y
0 3 0 9 2 0 0 7

Date Due

Upon Demand

Interest Rate

0.0000 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 92 / 118

LOANS

FOR LINE NUMBER:
(check only one)☐ 19a
☒ 19bNAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5869

LOAN SOURCE Full Name (Last, First, Middle Initial)
BB&T

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1909 K St., Nw

City Washington State DC ZIP Code 20006

Original Amount of Loan

3700.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3700.00

TERMS

Date Incurred

M M D D Y Y Y Y
0 6 3 0 2 0 0 7

Date Due

Upon Demand

Interest Rate

0.0000 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

3700.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 93 / 118

FOR LINE NUMBER:
(check only one)☐ 19a
☒ 19bNAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5136

LOAN SOURCE Full Name (Last, First, Middle Initial)
Alice Bransfield

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 12720 Builders Rd.

City Herndon State VA ZIP Code 20170

Original Amount of Loan

2300.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M M D D Y Y Y Y
0 3 0 6 2 0 0 7

Date Due

Upon Demand

Interest Rate

0.0000 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5136**

Schedule C-P

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 95 / 118

LOANS

FOR LINE NUMBER:
(check only one)☐ 19a
☒ 19bNAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5135

LOAN SOURCE Full Name (Last, First, Middle Initial)
Declan Bransfield

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 12720 Builders Rd.

City Herndon State VA ZIP Code 20170

Original Amount of Loan

2300.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 3D D
0 6Y Y Y Y
2 0 0 7

Upon Demand

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5135**

Schedule C-P

LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 97 / 118

FOR LINE NUMBER:
(check only one)☐ 19a
☒ 19bNAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5142

LOAN SOURCE Full Name (Last, First, Middle Initial)
Paul Cali

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 3902 Pender Spring Dr.

City Fairfax State VA ZIP Code 22033

Original Amount of Loan

2300.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M M
0 3D D
0 6Y Y Y Y
2 0 0 7

Date Due

Upon Demand

Interest Rate

0.0000

% (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5142**

Schedule C-P

LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 99 / 118

FOR LINE NUMBER:
(check only one)☐ 19a
☒ 19bNAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5137

LOAN SOURCE Full Name (Last, First, Middle Initial)
Bruce Eberle

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1449 Montague Dr.

City Vienna State VA ZIP Code 22181

Original Amount of Loan

2300.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 3D D
0 6Y Y Y Y
2 0 0 7

Upon Demand

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5137**

Schedule C-P

LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 101 / 118

FOR LINE NUMBER:
(check only one)☐ 19a
☒ 19bNAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5138

LOAN SOURCE Full Name (Last, First, Middle Initial)
Claire Eberle

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 9570 Mcglinn Dr.

City Laconnor State WA ZIP Code 98257

Original Amount of Loan

2300.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M M
0 3D D
0 6Y Y Y Y
2 0 0 7

Date Due

Upon Demand

Interest Rate

0.0000

% (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5138**

Schedule C-P

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 103 / 118

LOANS

FOR LINE NUMBER:
(check only one)☐ 19a
☒ 19bNAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5141

LOAN SOURCE Full Name (Last, First, Middle Initial)
Katherine Eberle

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1449 Montague Dr.

City Vienna State VA ZIP Code 22181

Original Amount of Loan

2300.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M M D D Y Y Y Y
0 3 0 6 2 0 0 7

Date Due

Upon Demand

Interest Rate

0.0000 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5141**

Schedule C-P

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 105 / 118

LOANS

FOR LINE NUMBER:
(check only one)☐ 19a
☒ 19bNAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5143

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robert Eberle

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 9570 Mcglinn Dr.

City Laconnor State WA ZIP Code 98257

Original Amount of Loan

2300.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M M
0 3D D
0 6Y Y Y Y
2 0 0 7

Date Due

Upon Demand

Interest Rate

0.0000

% (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5143**

Schedule C-P

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 107 / 118

LOANS

FOR LINE NUMBER:
(check only one)☐ 19a
☒ 19bNAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5145

LOAN SOURCE Full Name (Last, First, Middle Initial)
William Griffiths

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 4901 Tarheel Way

City Annandale State VA ZIP Code 22003

Original Amount of Loan

2006.12

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M M D D Y Y Y Y
0 3 0 6 2 0 0 7

Date Due

Upon Demand

Interest Rate

0.0000 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

A. Form/Schedule : **SC/12**

(Current loan balance of 2006.12 has been forgiven)

Transaction ID : **SC/12.5145**

Schedule C-P

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 109 / 118

LOANS

FOR LINE NUMBER:
(check only one)☐ 19a
☒ 19bNAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5139

LOAN SOURCE Full Name (Last, First, Middle Initial)
Elizabeth Livingstone

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 43013 Eustis St.

City South Riding State VA ZIP Code 20152

Original Amount of Loan

2012.77

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2012.77

TERMS

Date Incurred

M M D D Y Y Y Y
0 3 0 6 2 0 0 7

Date Due

Upon Demand

Interest Rate

0.0000 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

2012.77

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 110 / 118

LOANS

FOR LINE NUMBER:
(check only one)☐ 19a
☒ 19bNAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5140

LOAN SOURCE Full Name (Last, First, Middle Initial)
John Livingstone

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 43013 Eustis St.

City South Riding State VA ZIP Code 20152

Original Amount of Loan

1985.14

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1985.14

TERMS

Date Incurred

M M D D Y Y Y Y
0 3 0 6 2 0 0 7

Date Due

Upon Demand

Interest Rate

0.0000 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

1985.14

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 111 / 118

LOANS

FOR LINE NUMBER:
(check only one)☐ 19a
☒ 19bNAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5144

LOAN SOURCE Full Name (Last, First, Middle Initial)
Tammy Lyles-Cali

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 3902 Pender Spring Dr.

City Fairfax State VA ZIP Code 22033

Original Amount of Loan

2300.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M M
0 3D D
0 6Y Y Y Y
2 0 0 7

Date Due

Upon Demand

Interest Rate

0.0000

% (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

9997.91

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5144**

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 113 / 118

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Advanced Mailing Services

Nature of Debt (Purpose):
Direct Mail

Mailing Address 14970 Farm Creek Dr.

City State ZIP Code
Woodbridge VA 22191

Outstanding Balance Beginning This Period

2085.48

Transaction ID: SD12.5264

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2085.48

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Affordable Computer Rentals

Nature of Debt (Purpose):
Computer Rentals
Mailing Address 21760 Beaumeade Circle
Suite 170
City State ZIP Code
Ashburn VA 22150

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.5863

Amount Incurred This Period

1622.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

1622.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Allied Printing Resources

Nature of Debt (Purpose):
Direct Mail Printing

Mailing Address PO Box 6506

City State ZIP Code
Carlstadt NJ 07072

Outstanding Balance Beginning This Period

3692.58

Transaction ID: SD12.5265

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3692.58

1) **SUBTOTALS** This Period This Page (optional).....

7400.56

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 114 / 118

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Campaign Funding Direct

Nature of Debt (Purpose):
Direct Mail

Mailing Address 1420 Spring Hill Rd., Ste. 490

City State ZIP Code
McLean VA 22102

Outstanding Balance Beginning This Period

1000.00

Transaction ID: SD12.5266

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Catterton Printing

Nature of Debt (Purpose):
Direct Mail Prodcuton

Mailing Address 100 Post Office Rd.

City State ZIP Code
Waldorf MD 20602

Outstanding Balance Beginning This Period

9466.47

Transaction ID: SD12.5267

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9466.47

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Colortree of Virginia

Nature of Debt (Purpose):
Direct Mail Prodcuton

Mailing Address 8000 Villa Park Dr.

City State ZIP Code
Richmond VA 28990

Outstanding Balance Beginning This Period

2107.98

Transaction ID: SD12.5268

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2107.98

1) **SUBTOTALS** This Period This Page (optional).....

12574.45

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 115 / 118

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CP Direct

Nature of Debt (Purpose):
Direct Mail

Mailing Address 4600A Boston Way

City State ZIP Code
Lanham MD 20706

Outstanding Balance Beginning This Period

2767.40

Transaction ID: SD12.5269

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2767.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
EGC Business Center

Nature of Debt (Purpose):
Direct Mail

Mailing Address 1420 Spring Hill Rd., #490

City State ZIP Code
McLean VA 22102

Outstanding Balance Beginning This Period

2039.84

Transaction ID: SD12.5270

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2039.84

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Huckaby Davis Lisker

Nature of Debt (Purpose):
Accounting/Compliance

Mailing Address 228 S. Washington St., Ste. 115

City State ZIP Code
Alexandria VA 22314

Outstanding Balance Beginning This Period

11250.00

Transaction ID: SD12.5271

Amount Incurred This Period

2878.36

Payment This Period

0.00

Outstanding Balance at Close of This Period

14128.36

1) **SUBTOTALS** This Period This Page (optional).....

18935.60

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 116 / 118

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LeClair RyanNature of Debt (Purpose):
Legal Service FeesMailing Address 1701 Pennsylvania Ave N.W.
Suite 1045City State ZIP Code
Washington DC 20006

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.5861

Amount Incurred This Period

8461.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

8461.25

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Marcus Consulting, LLCNature of Debt (Purpose):
Strategice Consulting

Mailing Address 25 East Main Street

City State ZIP Code
Richmond VA 23219

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.5711

Amount Incurred This Period

45521.29

Payment This Period

16892.60

Outstanding Balance at Close of This Period

28628.69

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MDI Imaging & MailNature of Debt (Purpose):
Direct Mail

Mailing Address 21721 Filigree Ct.

City State ZIP Code
Ashburn VA 20147

Outstanding Balance Beginning This Period

3908.66

Transaction ID: SD12.5272

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3908.66

1) **SUBTOTALS** This Period This Page (optional).....

40998.60

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 117 / 118

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mercury Public Affairs, LLC

Nature of Debt (Purpose):
Polling and Travel

Mailing Address 137 Fifth Avenue
3rd Floor

City State ZIP Code
New York NY 10010

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.5720

Amount Incurred This Period

27522.40

Payment This Period

2042.40

Outstanding Balance at Close of This Period

25480.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Nova Label

Nature of Debt (Purpose):
Direct Mail Labels

Mailing Address 4819 Lydell Rd.

City State ZIP Code
Cheverly MD 20781

Outstanding Balance Beginning This Period

871.29

Transaction ID: SD12.5273

Amount Incurred This Period

0.00

Payment This Period

871.29

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Omega List Co.

Nature of Debt (Purpose):
Direct Mail List Rental

Mailing Address 1420 Spring Hill Rd., #490

City State ZIP Code
McLean VA 22102

Outstanding Balance Beginning This Period

8101.25

Transaction ID: SD12.5274

Amount Incurred This Period

0.00

Payment This Period

1618.65

Outstanding Balance at Close of This Period

6482.60

1) **SUBTOTALS** This Period This Page (optional).....

31962.60

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 118 / 118

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Political InkNature of Debt (Purpose):
Printing

Mailing Address 12936 Ashtree Rd.

City State ZIP Code
Midlothian VA 23114

Outstanding Balance Beginning This Period

11618.74

Transaction ID: SD12.5275

Amount Incurred This Period

0.00

Payment This Period

6550.00

Outstanding Balance at Close of This Period

5068.74

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon WirelessNature of Debt (Purpose):
Cell Phone

Mailing Address P.O. Box 17120

City State ZIP Code
Tucson AZ 95731

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.5862

Amount Incurred This Period

1988.91

Payment This Period

0.00

Outstanding Balance at Close of This Period

1988.91

1) **SUBTOTALS** This Period This Page (optional)..... ▶

7057.65

2) **TOTALS** This Period (last page this line number only)..... ▶

118929.46

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

9997.91

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

128927.37